

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

JEWISH COUNCIL FOR EDUCATION AND RESEARCH

ADDRESS (number and street)

1 PENN PLAZA

SUITE 6171

☐ Check if different than previously reported. (ACC)

NEW YORK

NY

10119

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00452847

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

DC

5. Covering Period

M M M / D D D / Y Y Y Y Y Y

10

18

2012

through

M M M / D D D / Y Y Y Y Y Y

11

26

2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mikhael Moore

Signature of Treasurer

Mikhael Moore

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

01

09

2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

## JEWISH COUNCIL FOR EDUCATION AND RESEARCH

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 18 / 2012 To: M M / D D / Y Y Y Y Y Y  
11 / 26 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		194.00
(b) Cash on Hand at Beginning of Reporting Period.....	49185.00	
(c) Total Receipts (from Line 19) .....	163099.50	442625.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	212284.50	442819.50
7. Total Disbursements (from Line 31) .....	103566.70	334101.70
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	108717.80	108717.80
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	7703.14	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	8		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	6		2	0	1	2

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	114000.00	348700.00
(ii) Unitemized .....	8099.50	26925.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	122099.50	375625.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	41000.00	66000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ..... ►	163099.50	441625.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	1000.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ..... ►	163099.50	442625.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ..... ►	163099.50	442625.50

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	51941.88	250150.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	51941.88	250150.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	51624.82	83851.38
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	100.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	103566.70	334101.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	103566.70	334101.70

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	163099.50	441625.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	163099.50	441625.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	51941.88	250150.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	51941.88	250150.32

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 32  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

Full Name (Last, First, Middle Initial)

**A. Steven S. Fischman**

Mailing Address One Wells Avenue

City State Zip Code  
 Newton MA 02459

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 New England Development

Occupation  
 Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 07 / 2012

**Transaction ID : SA11AI.9715**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Chandra Friese**

Mailing Address 3675 Clay St.

City State Zip Code  
 San Francisco CA 94118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Mayne and company RE

Occupation  
 real estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 28 / 2012

**Transaction ID : SA11AI.9433**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Irving A. Smokler**

Mailing Address 2424 N. Federal Highway

City State Zip Code  
 Boca Raton FL 33431

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 25 / 2012

**Transaction ID : SA11AI.9709**

Amount of Each Receipt this Period

10000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

13000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 32  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

Full Name (Last, First, Middle Initial)

**A. Alexander Soros**

Mailing Address 888 7th Avenue

City State Zip Code  
 New York NY 10106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 26 2012

**Transaction ID : SA11AI.9718**

Amount of Each Receipt this Period

100000.00

Full Name (Last, First, Middle Initial)

**B. Marion Usher**

Mailing Address 2021 Hilyer Place, NW

City State Zip Code  
 Washington DC 20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Therapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 25 2012

**Transaction ID : SA11AI.9711**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

101000.00

**TOTAL** This Period (last page this line number only)..... ►

114000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 32

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN BRIDGE 21ST CENTURY**

Mailing Address 700 13TH STREET, NW, SUITE 600

City State Zip Code  
 WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00492140

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

**11** / **07** / **2012**

**Transaction ID : SA11C.9714**

Amount of Each Receipt this Period

25000.00

Full Name (Last, First, Middle Initial)

## **B. AMERICAN BRIDGE 21ST CENTURY**

Mailing Address 700 13TH STREET, NW, SUITE 600

City State Zip Code  
 WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00492140

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

66000.00

Date of Receipt

**11** / **13** / **2012**

**Transaction ID : SA11C.9719**

Amount of Each Receipt this Period

16000.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

41000.00

41000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 32

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 14 Arrow Street, Suite 11

City Cambridge      State MA      Zip Code 02138

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 26 / 2012
**Transaction ID : SB21B.9789**

Amount of Each Disbursement this Period

294.07

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 60 Massachusetts Avenue, NE

City Washington      State DC      Zip Code 20002

Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 23 / 2012
**Transaction ID : SB21B.9785**

Amount of Each Disbursement this Period

199.00

Full Name (Last, First, Middle Initial)

**C. Walter Karman Bell**

Mailing Address 481 8th Avenue

City New York      State NY      Zip Code 10001

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 21 / 2012
**Transaction ID : SB21B.9720**

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

993.07

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

Full Name (Last, First, Middle Initial)

**A. Berlin Rosen**

Mailing Address 15 Maiden Lane, Suite 1600

City	State	Zip Code
New York	NY	10038

Purpose of Disbursement  
Public Relations Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2012

**Transaction ID : SB21B.9722**

Amount of Each Disbursement this Period

11750.00
----------

Full Name (Last, First, Middle Initial)

**B. Berlin Rosen**

Mailing Address 15 Maiden Lane, Suite 1600

City	State	Zip Code
New York	NY	10038

Purpose of Disbursement  
Public Relations Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		11		2012

**Transaction ID : SB21B.9771**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. Chase**

Mailing Address PO Box 260180

City	State	Zip Code
Baton Rouge	LA	70826

Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2012

**Transaction ID : SB21B.9729**

Amount of Each Disbursement this Period

12.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

14262.00
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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

JEWISH COUNCIL FOR EDUCATION AND RESEARCH

### A. Chase

Date of Disbursement

Transaction ID : SB21B.9737

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	14.5
25-34	13.5
35-44	12.5
45-54	11.5
55-64	10.5
65-74	9.5
75-84	8.5
85+	1.5

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

### B. Chase

Date of Disbursement

Mailing Address PO Box 260180

City	State	Zip Code
Baton Rouge	LA	70826

Transaction ID : SB21B.9779

Purpose of Disbursement	Credit Card Overpayment and Interest
-------------------------	--------------------------------------

Amount of Each Disbursement this Period

Age Group	Number of People
13-17	287
18-24	150
25-34	120
35-44	100
45-54	80
55-64	60
65-74	40
75-84	20
85+	10

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

### C. Chase

Date of Disbursement

Mailing Address PO Box 260180

City	State	Zip Code
Baton Rouge	LA	70826

Transaction ID : SB21B.9782

Purpose of Disbursement
Bank Charges

A diagram of a rectangular frame structure. It consists of a horizontal top beam and a horizontal bottom beam, connected by four vertical supports. The supports are located at the left end, and at three equally spaced intervals along the length of the beams.

Amount of Each Disbursement this Period

15.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

317.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

Full Name (Last, First, Middle Initial)

**A. Constant Contact**

Mailing Address 122 Hudson Street

City New York      State NY      Zip Code 10013

Purpose of Disbursement  
Email Management

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 13 / 2012
**Transaction ID : SB21B.9781**

Amount of Each Disbursement this Period

54.44

Full Name (Last, First, Middle Initial)

**B. Amy Dixon**

Mailing Address 365 Irving Avenue

City South Orange      State NJ      Zip Code 07079

Purpose of Disbursement  
Administrative Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 13 / 2012
**Transaction ID : SB21B.9772**

Amount of Each Disbursement this Period

303.26

Full Name (Last, First, Middle Initial)

**C. Miriam Fogelson**

Mailing Address 146a Nassau Avenue Apt 1

City Brooklyn      State NY      Zip Code 11222

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2012
**Transaction ID : SB21B.9733**

Amount of Each Disbursement this Period

4526.48

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4884.18

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

Full Name (Last, First, Middle Initial)

**A. Miriam Fogelson**

Mailing Address 146a Nassau Avenue Apt 1

City	State	Zip Code
Brooklyn	NY	11222

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		14		2012

**Transaction ID : SB21B.9783**

Amount of Each Disbursement this Period

4775.00
---------

Full Name (Last, First, Middle Initial)

**B. Godaddy.com**

Mailing Address 14455 North Hayden Rd.

City	State	Zip Code
Scottsdale	AZ	85260

Purpose of Disbursement  
Internet

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2012

**Transaction ID : SB21B.9730**

Amount of Each Disbursement this Period

30.51
-------

Full Name (Last, First, Middle Initial)

**C. Godaddy.com**

Mailing Address 14455 North Hayden Rd.

City	State	Zip Code
Scottsdale	AZ	85260

Purpose of Disbursement  
Internet

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2012

**Transaction ID : SB21B.9744**

Amount of Each Disbursement this Period

14.34
-------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4819.85

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

JEWISH COUNCIL FOR EDUCATION AND RESEARCH

12.48

Category/  
Type

200.00

Category/  
Type

The image shows three 3x3 grids, each representing a number using the letters M, D, and Y. The first grid shows the number 11, with 'M' in the top-left and top-right positions, and '11' in the center. The second grid shows the number 13, with 'D' in the top-left and top-right positions, and '13' in the center. The third grid shows the number 2012, with 'Y' in the top-left, top-middle, top-right, and middle-right positions, and '2012' in the center.

Amount of Each Disbursement this Period

350.00

State:  District:

562.48

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 32

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

Full Name (Last, First, Middle Initial)

**A. Google**

Mailing Address 1600 Ampitheatre Parkway

City Mountain View      State CA      Zip Code 94043

Purpose of Disbursement  
Internet

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 26 / 2012
**Transaction ID : SB21B.9788**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Gristides**

Mailing Address 307 West 26th Street

City New York      State NY      Zip Code 10001

Purpose of Disbursement  
Election Night Food

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 07 / 2012
**Transaction ID : SB21B.9760**

Amount of Each Disbursement this Period

244.40

Full Name (Last, First, Middle Initial)

**C. Eric Hasse**

Mailing Address 22740 Clarendon St.

City Woodland Hills      State CA      Zip Code 91367

Purpose of Disbursement  
Video Production

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 29 / 2012
**Transaction ID : SB21B.9743**

Amount of Each Disbursement this Period

400.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1144.40

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 32

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

Full Name (Last, First, Middle Initial)

**A. Laura Yvonne Hayes**

Mailing Address PO Box 39725

City Los Angeles      State CA      Zip Code 90039

Purpose of Disbursement  
Video Production

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10      29      2012
**Transaction ID : SB21B.9738**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**B. James P Horan**

Mailing Address 12211 Spring Trail

City Sylmar      State CA      Zip Code 91324

Purpose of Disbursement  
Video Production

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10      29      2012
**Transaction ID : SB21B.9740**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Humongous Inc.**

Mailing Address 49 Douglass Street

City Brooklyn      State NY      Zip Code 11231

Purpose of Disbursement  
Video Production

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10      24      2012
**Transaction ID : SB21B.9731**

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1600.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

Full Name (Last, First, Middle Initial)

**A. Kobeyaki**

Mailing Address 293 7th Ave.

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2012

**Transaction ID : SB21B.9774**

Amount of Each Disbursement this Period

259.10
--------

Full Name (Last, First, Middle Initial)

**B. Mik Moore Consulting, LLC**Mailing Address 330 7th Avenue  
Suite 1901

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2012

**Transaction ID : SB21B.9773**

Amount of Each Disbursement this Period

10000.00
----------

Full Name (Last, First, Middle Initial)

**C. New Organizing Institute**

Mailing Address 1133 19th St NW Suite 850

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement  
Conference Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		23		2012

**Transaction ID : SB21B.9786**

Amount of Each Disbursement this Period

206.98
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10466.08
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

Full Name (Last, First, Middle Initial)

**A. Akia Ginneh Pacheco**

Mailing Address 735 Maltman Avenue

City	State	Zip Code
Los Angeles	CA	90026

Purpose of Disbursement  
Video Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

**Transaction ID : SB21B.9752**

Amount of Each Disbursement this Period

300.00
--------

Full Name (Last, First, Middle Initial)

**B. John Randolph**

Mailing Address 316 W. 93rd St

City	State	Zip Code
New York	NY	10025

Purpose of Disbursement  
Video Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2012

**Transaction ID : SB21B.9723**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Corrine Ray**

Mailing Address 836 Bergen Street

City	State	Zip Code
Brooklyn	NY	11238

Purpose of Disbursement  
Video Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		11		2012

**Transaction ID : SB21B.9769**

Amount of Each Disbursement this Period

600.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1900.00
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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

JEWISH COUNCIL FOR EDUCATION AND RESEARCH

### A. Aram Rubenstein-Gillis

Date of Disbursement

Transaction ID : SB21B.9821

Amount of Each Disbursement this Period

545.00

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. Sandler, Reiff, Young & Lamb, PC**

Date of Disbursement

Transaction ID : SB21B.9734

Amount of Each Disbursement this Period

840.00

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

### C. Shoot the Messenger Productions

Date of Disbursement

Mailing Address 423 Atlantic Ave

Transaction ID : SB21B.9727

Amount of Each Disbursement this Period

2500.00

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

3885.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

Full Name (Last, First, Middle Initial)

**A. John Slabyk**

Mailing Address 25 Stearns Ave

City	State	Zip Code
Buffalo	NY	14218

Purpose of Disbursement  
Video Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

**Transaction ID : SB21B.9750**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. Video Genie**

Mailing Address 4 W. 4th Ave Unit 308

City	State	Zip Code
San Mateo	CA	94402

Purpose of Disbursement  
Video Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

**Transaction ID : SB21B.9754**

Amount of Each Disbursement this Period

1750.00
---------

Full Name (Last, First, Middle Initial)

**C. Elon James White**

Mailing Address 377 Montgomery St

City	State	Zip Code
Brooklyn	NY	11225

Purpose of Disbursement  
Video Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2012

**Transaction ID : SB21B.9725**

Amount of Each Disbursement this Period

2500.00
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6250.00
---------

51084.06
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**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 21 OF 32

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.8374

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH****LOAN SOURCE** Full Name (Last, First, Middle Initial)

Mik Moore Consulting, LLC

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 330 7th Avenue  
Suite 1901

City New York

State NY

ZIP Code 10001

Original Amount of Loan

500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
01 / 26 / 2012

Date Due

M M / D D / Y Y Y Y

D D / Y Y Y Y

none

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

500.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 22 OF 32

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.8375

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH****LOAN SOURCE** Full Name (Last, First, Middle Initial)

Mik Moore Consulting, LLC

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 330 7th Avenue  
Suite 1901

City New York

State NY

ZIP Code 10001

Original Amount of Loan

500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500.00

**TERMS**

Date Incurred

M M M /  
03D D D /  
26Y Y Y Y Y Y  
2012

Date Due

M M M /

D D D /

Y Y Y Y Y Y  
none

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

500.00

**TOTALS** This Period (last page in this line only)..... ►

1000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 23 OF 32

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Michelle Citrin**

Nature of Debt (Purpose):

Media Production

Mailing Address 98 St. Marks Ave  
Apt 2City State Zip Code  
Brooklyn NY 11217

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.9817

Amount Incurred This Period

180.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

180.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Margot Leverett**

Nature of Debt (Purpose):

Media Production

Mailing Address 21-21 29th Street

City State Zip Code  
Astoria NY 11105

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.9818

Amount Incurred This Period

180.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

180.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Mikhael Moore**

Nature of Debt (Purpose):

Payroll

Mailing Address 630 Fort Washington Ave

City State Zip Code  
New York NY 10040

Outstanding Balance Beginning This Period

5483.14

Transaction ID : SD10.8257

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5483.14

1) **SUBTOTALS** This Period This Page (optional)..... ►

5843.14

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 24 OF 32

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Aram Rubenstein-Gillis**Nature of Debt (Purpose):  
Media Production

Mailing Address 1614 10th Avenue

City State

Zip Code

Brooklyn

NY

11215

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.9797

Amount Incurred This Period

500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Uri Sharlin**Nature of Debt (Purpose):  
Media Production

Mailing Address 255 Eastern Parkway

City State

Zip Code

Brooklyn

NY

11238

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.9819

Amount Incurred This Period

180.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

180.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Jake Shulman-Mant**Nature of Debt (Purpose):  
Media Production

Mailing Address 68 Edgars Lane

City State

Zip Code

Hastings on Hudson

NY

10706

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.9796

Amount Incurred This Period

180.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

180.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

860.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 25 OF 32

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**JEWISH COUNCIL FOR EDUCATION AND RESEARCH**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**St. Louis Jewish Light**Nature of Debt (Purpose):  
Advertising

Mailing Address 6 Millstone Campus

City State

Zip Code

St. Louis

MO

63146

Outstanding Balance Beginning This Period

9387.82

Transaction ID : SD10.7860

Amount Incurred This Period

0.00

Payment This Period

9387.82

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

6703.14

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

1000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

7703.14

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 26 OF 32  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>JEWISH COUNCIL FOR EDUCATION AND RESEARCH</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00452847       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name (Last, First, Middle Initial) of Payee <b>Another Green World Productions</b>		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 23 / 2012</div>	
Mailing Address 9400 Flicker Way		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">12500.00</div>	
City Los Angeles	State CA	Zip Code 90069	
Purpose of Expenditure Video Production - Dissem 10/31/12	Category/ Type	Transaction ID : <b>SE.9349</b> Office Sought: <input type="checkbox"/> House    State: DC <input type="checkbox"/> Senate    District: 00 <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">43987.00</div>	

Full Name (Last, First, Middle Initial) of Payee <b>Another Green World Productions</b>		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 25 / 2012</div>	
Mailing Address 9400 Flicker Way		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6000.00</div>	
City Los Angeles	State CA	Zip Code 90069	
Purpose of Expenditure Video Production - Dissem 10/31/12	Category/ Type	Transaction ID : <b>SE.9351</b> Office Sought: <input type="checkbox"/> House    State: DC <input type="checkbox"/> Senate    District: 00 <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">49987.00</div>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">18500.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mikhael Moore

[Electronically Filed]

Signature

Date

 MM / DD / YYYY  
 01 / 09 / 2013

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 27 OF 32  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>JEWISH COUNCIL FOR EDUCATION AND RESEARCH</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00452847         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Michelle Citrin</b> <b>[MEMO ITEM]</b>		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2012</div> </div>	
Mailing Address 98 St. Marks Ave Apt 2		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">180.00</div>	
City Brooklyn	State NY	Zip Code 11217	Transaction ID : <b>SE.9808</b>
Purpose of Expenditure Media Production	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: DC District: 00	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">55987.00</div>	

Full Name (Last, First, Middle Initial) of Payee <b>Detroit Free Press</b>		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">2012</div> </div>	
Mailing Address 615 W. Lafayette		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2187.00</div>	
City Detroit	State MI	Zip Code 48226	Transaction ID : <b>SE.9345</b>
Purpose of Expenditure Newspaper Advertising	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: DC District: 00	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">58174.00</div>	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">2187.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"></div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mikhael Moore

[Electronically Filed]

Signature

Date

M M M

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09

2013

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 28 OF 32  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>JEWISH COUNCIL FOR EDUCATION AND RESEARCH</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00452847       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           M M M / D D D / Y Y Y Y Y Y         </div>		

Full Name (Last, First, Middle Initial) of Payee <b>Detroit Jewish News</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           M M M / D D D / Y Y Y Y Y Y         </div>	
Mailing Address P.O. Box 2267		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           10 / 18 / 2012         </div>	
City Southfield	State MI	Zip Code 48037	Transaction ID : SE.9315
Purpose of Expenditure Newspaper Ad	Category/ Type	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           31487.00         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Detroit Jewish News</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           M M M / D D D / Y Y Y Y Y Y         </div>	
Mailing Address P.O. Box 2267		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           10 / 29 / 2012         </div>	
City Southfield	State MI	Zip Code 48037	Transaction ID : SE.9344
Purpose of Expenditure Newspaper Advertising	Category/ Type	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           55987.00         </div>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           7950.00         </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           6000.00         </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           13950.00         </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mikhael Moore

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 29 OF 32  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>JEWISH COUNCIL FOR EDUCATION AND RESEARCH</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00452847       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>		

Full Name (Last, First, Middle Initial) of Payee <b>Facebook</b>		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 01 / 2012	
Mailing Address 156 University Ave.		Amount <span style="border: 1px solid black; padding: 2px;">6000.00</span>	
City Palo Alto	State CA	Zip Code 94301	
Purpose of Expenditure Web Advertising	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: DC District: 00 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">64774.00</span>		Transaction ID : SE.9359	

Full Name (Last, First, Middle Initial) of Payee <b>Google</b>		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 01 / 2012	
Mailing Address 1600 Ampitheatre Parkway		Amount <span style="border: 1px solid black; padding: 2px;">7000.00</span>	
City Mountain View	State CA	Zip Code 94043	
Purpose of Expenditure Web Advertising	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: DC District: 00 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) <span style="border: 1px solid black; padding: 2px;"> </span>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">71774.00</span>		Transaction ID : SE.9361	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">13000.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mikhael Moore

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
 01 / 09 / 2013

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 30 OF 32  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>JEWISH COUNCIL FOR EDUCATION AND RESEARCH</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00452847
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee <b>Margot Leverett</b>		Date MM / DD / YYYY <b>10 / 31 / 2012</b>
[MEMO ITEM] Mailing Address 21-21 29th Street		Amount <b>180.00</b>
City Astoria	State NY	
Purpose of Expenditure Media Production	Category/ Type	Transaction ID : <b>SE.9810</b>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <u>DC</u> District: <u>00</u>
Calendar Year-To-Date Per Election for Office Sought <b>55987.00</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Adriel Luis</b>		Date MM / DD / YYYY <b>11 / 01 / 2012</b>
Mailing Address 3400 Stevenson Blvd #37D		Amount <b>600.00</b>
City Fremont	State CA	
Purpose of Expenditure Video Production - Dissem 10/31/12	Category/ Type	Transaction ID : <b>SE.9352</b>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <u>DC</u> District: <u>00</u>
Calendar Year-To-Date Per Election for Office Sought <b>58774.00</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>600.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mikhael Moore

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
**01 / 09 / 2013**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 31 OF 32  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>JEWISH COUNCIL FOR EDUCATION AND RESEARCH</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00452847         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Aram Rubenstein-Gillis</b> <b>[MEMO ITEM]</b>		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2012</div> </div>	
Mailing Address 1614 10th Avenue		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div>	
City Brooklyn	State NY		
Purpose of Expenditure Media Production	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: DC District: 00 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
<div style="border: 1px solid black; padding: 2px; text-align: right;">55987.00</div>			

Transaction ID : SE.9792

Full Name (Last, First, Middle Initial) of Payee <b>Uri Sharlin</b> <b>[MEMO ITEM]</b>		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2012</div> </div>	
Mailing Address 255 Eastern Parkway		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">180.00</div>	
City Brooklyn	State NY		
Purpose of Expenditure Media Production	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: DC District: 00 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
<div style="border: 1px solid black; padding: 2px; text-align: right;">55987.00</div>			

Transaction ID : SE.9812

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mikhael Moore

[Electronically Filed]

Signature

Date

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Y Y Y Y Y Y

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2013

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 32 OF 32  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>JEWISH COUNCIL FOR EDUCATION AND RESEARCH</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00452847       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name (Last, First, Middle Initial) of Payee <b>Jake Shulman-Mant</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 31 / 2012	
[MEMO ITEM] Mailing Address 68 Edgars Lane		Amount <span style="border: 1px solid black; padding: 2px;">180.00</span>	
City Hastings on Hudson	State NY	Zip Code 10706	Transaction ID : SE.9790
Purpose of Expenditure Media Production	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">55987.00</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>St. Louis Jewish Light</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 29 / 2012	
Mailing Address 6 Millstone Campus		Amount <span style="border: 1px solid black; padding: 2px;">9387.82</span>	
City St. Louis	State MO	Zip Code 63146	Transaction ID : SE.9745
Purpose of Expenditure Advertising	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">11274.93</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">9387.82</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">51624.82</span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mikhael Moore

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 01 / 09 / 2013

Signature